

I mean, I am talking 175,000 people in my State alone not being able to have long-term Medicaid care over the 7-year period if this goes through, 16,000 in the first year.

□ 1600

We are talking perhaps, what we hear, of doubling the premium. And we are talking about people here on Social Security, people who get half of their income, 60 percent of the people on Medicare get over half of their income from Social Security. We are talking primarily about women. We are talking about people with incomes of about \$18,000, and absorbing \$1,000 extra a year. This is important stuff to important people, and it ought to have more than 1 day of hearings.

Mr. GIBBONS. Mr. Speaker, will the gentleman yield?

Mr. BONIOR. I yield to the gentleman from Florida.

Mr. GIBBONS. Mr. Speaker, I am just incredibly mystified by the arguments I hear here. As the gentleman from California [Mr. THOMAS] said, I attended these meetings, even though I am not a member of the subcommittee. They were pabulum hearings. They had nothing to do with the meat of the program. They were just people making suggestions or complaining.

But nobody yet has seen a plan. And when that plan comes out, it is going to be not just 1 page of paper, but it is going to be 400 or 500 pages of paper, crammed with details.

This is a very complex program. It is more than just medical care for the aged. It is medical care for all of the disabled in the United States, it is medical care for all of the kidney failure patients in the United States, it is all long-term care for aged people or for disabled people. It is medical education. I do not know what can be more important than training doctors, and the Medicare Program trains them. There that is where the money comes from.

What about all of the hospitals that take care of all of these indigent people that do not have any money? That is where Medicare money is spent. We know nothing of what they plan to do in all of this program. They have never mentioned the first line of it.

I ran into a newspaper reporter out here in the Speaker's lobby the other day that was carrying around a copy of your program. I said, "You know, that is what I put out as to what I thought was going to be in the program." He was peddling it to me as if it were the program.

This is ridiculous. I never heard of anybody making as big a change in the economic and social and safety net of this country, and not telling the American people what they plan to do. This is preposterous.

The SPEAKER pro tempore (Mr. DIAZ-BALART). The gentleman from Michigan [Mr. BONIOR] will be advised that his 1-minute is expiring soon.

Mr. BONIOR. Mr. Speaker, I believe my request was to speak out of order.

Mr. DREIER. To inquire of the program for the week.

The SPEAKER pro tempore. That is correct. The Chair would construe and did construe the gentleman's request as the traditional request to speak out of order for 1 minute.

Mr. BONIOR. Mr. Speaker, I do not think I asked for a time.

The SPEAKER pro tempore. To discuss the program for next week.

Mr. BONIOR. I will respect the Chair's views on this and the Speaker's views on this, and would yield if I could for just one more comment to my friend from Michigan, Mr. LEVIN, and to my friend from California, Mr. DREIER, if that would be permissible.

The SPEAKER pro tempore. Having informed the gentleman from Michigan of the reality of the time soon expiring, the Chair would certainly permit that.

Mr. BONIOR. Mr. Speaker, I yield for a short comment or question to my friend from California before we terminate the debate.

Mr. LEVIN. Mr. Speaker, I just want to say in terms of the schedule for next week, I have now read this document, an outline released by the House leadership. I would say to the gentleman from Florida [Mr. GIBBONS], it is worse than a blank piece of paper. It says little, and what it says is often untrue.

For example, it says that there is no change in copayments that is strictly false. Copayments under current law would go up to \$61. This plan, apparently, at least from what we have read in the paper, would push this up to \$90 or \$100 a month over the present \$46 in the year 2002.

I simply want to say as to the schedule next week, it is disgraceful. In the Committee on Ways and Means, they have planned one day of hearings, as the gentleman from Florida [Mr. GIBBONS] has said.

We were promised a plan today. We do not have it. I think it is partly you do not want us to have it until the last minute, and it is also because not only is the devil in the details, but they are having a devilish time with the details.

So I am glad the gentleman from Michigan [Mr. BONIOR] asked for the schedule for next week. I just want to say this is a schedule totally inadequate for the mammoth radical changes that have been proposed in general by the majority, the details of which are being held back or scrambled with or both. Here it is Thursday, and we still do not have them.

Mr. DREIER. Mr. Speaker, will the gentleman yield?

Mr. BONIOR. I yield to the gentleman from Pasadena.

Mr. DREIER. Close.

Mr. BONIOR. Close by.

Mr. DREIER. Mr. Speaker, I thank my friend for yielding.

Mr. Speaker, I would simply like to respond to all three of my friends here who are discussing what is clearly a very important issue by saying, first, it has been concluded we will have only one day of hearings. It is possible that

there could be an additional hearing. The distinguished ranking minority Member, my friend, the gentleman from Florida [Mr. GIBBONS], is in a position to look towards an additional hearing on this.

I think it is also very sad to take an issue which is so critically important, which we have agreed to step up to the plate and address in response to the Board of Trustees' Report that was signed by Secretary Rubin, Secretary Reich, and the Secretary of Health and Human Services, Ms. Shalala, stating this system will be broke within seven years.

The American people overwhelmingly are supportive of our goal of dealing with this. As I said earlier, the President of the United States has acknowledged that we are going to have to slow this exponential growth in the cost of Medicare, well beyond the rate of inflation, nearly three times the rate of inflation, based on the figures that just came out yesterday.

So it strikes me we are doing the responsible thing. And to have my friends just criticizing willy-nilly, when there is going to be opportunity to look at this issue, and to say that somehow when this hearing opens, it will be the first time that the word "Medicare" will have been uttered in any committee, is preposterous, because we for months and months and months have seen this debate raging on. I think we have a very good and adequate schedule put together for next week.

Mr. BONIOR. Mr. Speaker, I would conclude by just saying to my friend on the Medicare Trustee issue, that the Medicare trustees have said that the proposal by the Republicans will not extend the life of Medicare by one day, because that money is going into a special fund for tax cuts that are going primarily to the wealthiest individuals and the wealthiest corporations in America.

ADJOURNMENT TO MONDAY, SEPTEMBER 18, 1995

Mr. ALLARD. Mr. Speaker, I ask unanimous consent that when the House adjourns today, it adjourn to meet at 10:30 a.m. on Monday next for morning hour debates.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Colorado?

There was no objection.

DISPENSING WITH CALENDAR WEDNESDAY BUSINESS ON WEDNESDAY NEXT

Mr. ALLARD. Mr. Speaker, I ask unanimous consent that the business in order under the Calendar Wednesday rule be dispensed with on Wednesday next.

The SPEAKER pro tempore. Is there objection to the request of the gentleman from Colorado?

There was no objection.